

House Engrossed Senate Bill

**FILED**

**JANICE K. BREWER  
SECRETARY OF STATE**

State of Arizona  
Senate  
Forty-seventh Legislature  
Second Regular Session  
2006

**CHAPTER 307**

## **SENATE BILL 1137**

AN ACT

AMENDING TITLE 36, CHAPTER 29, ARIZONA REVISED STATUTES, BY ADDING ARTICLE 5;  
RELATING TO THE COMPREHENSIVE ELDER CARE PROGRAM.

(TEXT OF BILL BEGINS ON NEXT PAGE)

1 Be it enacted by the Legislature of the State of Arizona:

2 Section 1. Title 36, chapter 29, Arizona Revised Statutes, is amended  
3 by adding article 5, to read:

4 ARTICLE 5. COMPREHENSIVE CARE FOR THE ELDERLY PROGRAM

5 36-2999.01. Definitions

6 IN THIS ARTICLE, UNLESS THE CONTEXT OTHERWISE REQUIRES:

7 1. "ADMINISTRATION" MEANS THE ARIZONA HEALTH CARE COST CONTAINMENT  
8 SYSTEM ADMINISTRATION.

9 2. "ARIZONA LONG-TERM CARE SYSTEM" MEANS THE SYSTEM ESTABLISHED  
10 PURSUANT TO ARTICLE 2 OF THIS CHAPTER.

11 3. "CENTER" MEANS A FACILITY OPERATED BY A COMPREHENSIVE CARE FOR THE  
12 ELDERLY ORGANIZATION WHERE PRIMARY CARE AND OTHER SERVICES ARE FURNISHED TO  
13 PARTICIPANTS.

14 4. "COMPREHENSIVE CARE FOR THE ELDERLY PROGRAM" MEANS A PROVIDER  
15 DIRECTED PROGRAM OF COMPREHENSIVE CARE FOR THE ELDERLY THAT DIRECTLY DELIVERS  
16 COMPREHENSIVE MEDICAL AND SOCIAL SERVICES TO ELIGIBLE MEMBERS.

17 5. "DIRECTOR" MEANS THE DIRECTOR OF THE ARIZONA HEALTH CARE COST  
18 CONTAINMENT SYSTEM ADMINISTRATION.

19 6. "ELIGIBLE PARTICIPANT" MEANS A MEMBER WHO:

20 (a) IS A RESIDENT OF THIS STATE AND A UNITED STATES CITIZEN OR A  
21 PERSON WHO MEETS THE REQUIREMENTS FOR QUALIFIED ALIEN STATUS AS DETERMINED  
22 PURSUANT TO SECTION 36-2903.03, WHO ENTERED THE UNITED STATES ON OR BEFORE  
23 AUGUST 21, 1996 OR WHO ENTERED THE UNITED STATES ON OR AFTER AUGUST 22, 1996  
24 AND WHO IS A MEMBER OF AN EXCEPTION GROUP UNDER PUBLIC LAW 104-193, SECTION  
25 412.

26 (b) MEETS THE ELIGIBILITY CRITERIA PURSUANT TO SECTION 36-2934.

27 (c) NEEDS INSTITUTIONAL SERVICES AS DETERMINED PURSUANT TO  
28 SECTION 36-2936.

29 (d) IS DEFINED AS ELIGIBLE PURSUANT TO SECTION 1902(a)(10)(A)(ii)(XV)  
30 AND (XVI) OF TITLE XIX OF THE SOCIAL SECURITY ACT AND WHO MEETS THE INCOME  
31 REQUIREMENTS OF SECTION 36-2950.

32 (e) RESIDES IN THE COMPREHENSIVE CARE FOR THE ELDERLY ORGANIZATION'S  
33 SERVICE AREA.

34 (f) IS WILLING TO ABIDE BY THE REQUIREMENT THAT ELIGIBLE PARTICIPANTS  
35 RECEIVE ALL HEALTH AND LONG-TERM CARE SERVICES EXCLUSIVELY FROM THE  
36 COMPREHENSIVE CARE FOR THE ELDERLY ORGANIZATION AND ITS CONTRACTED OR  
37 REFERRED PROVIDERS UNLESS IT IS AN EMERGENCY SERVICE.

38 (g) HAS SELECTED THE PROGRAM AS THAT PERSON'S PROVIDER OF SERVICES.

39 (h) IS ABLE TO BE MAINTAINED IN A COMMUNITY BASED SETTING AT THE TIME  
40 OF ENROLLMENT WITHOUT JEOPARDIZING THE ELIGIBLE PARTICIPANT'S HEALTH OR  
41 SAFETY.

42 7. "INTERDISCIPLINARY TEAM" MEANS CENTER STAFF AND COMPREHENSIVE CARE  
43 FOR THE ELDERLY SUBCONTRACTORS WHO HAVE CURRENT AND APPROPRIATE LICENSURE,  
44 CERTIFICATION OR ACCREDITATION AND WHO ARE RESPONSIBLE FOR ASSESSMENT AND  
45 DEVELOPMENT OF THE COMPREHENSIVE CARE FOR THE ELDERLY PARTICIPANT'S CARE PLAN

1 AND MAY CONDUCT ASSESSMENTS OF THE PARTICIPANTS AND PROVIDE SERVICES  
2 TO PARTICIPANTS WITHIN THE TEAM MEMBER'S SCOPE OF PRACTICE. THE  
3 INTERDISCIPLINARY TEAM MAY INCLUDE A:

- 4 (a) PRIMARY CARE PROVIDER.
- 5 (b) REGISTERED NURSE.
- 6 (c) SOCIAL WORKER.
- 7 (d) OCCUPATIONAL THERAPIST.
- 8 (e) PHYSICAL THERAPIST.
- 9 (f) RECREATIONAL THERAPIST OR ACTIVITY COORDINATOR.
- 10 (g) DIETICIAN.
- 11 (h) CENTER MANAGER.
- 12 (i) HOME CARE COORDINATOR.
- 13 (j) PERSONAL CARE ATTENDANT OR REPRESENTATIVE.
- 14 (k) VAN DRIVER OR THE VAN DRIVER'S REPRESENTATIVE.

15 8. "MEMBER" MEANS AN ELIGIBLE PERSON WHO IS ENROLLED IN THE ARIZONA  
16 LONG-TERM CARE SYSTEM PURSUANT TO ARTICLE 2 OF THIS CHAPTER.

17 9. "ORGANIZATION" MEANS AN ORGANIZATION THAT PROVIDES ALL MEDICAL AND  
18 LONG-TERM CARE SERVICES UNDER A COMPREHENSIVE CARE FOR THE ELDERLY PROGRAM  
19 AND SHALL BE CAPITATED BY A PROGRAM CONTRACTOR FOR MEDICAID SERVICES AND MAY  
20 BE CAPITATED BY A PROGRAM CONTRACTOR FOR MEDICARE SERVICES.

21 10. "PROGRAM AGREEMENT" MEANS AN AGREEMENT BETWEEN THE ORGANIZATION AND  
22 A PROGRAM CONTRACTOR.

23 11. "PROGRAM CONTRACTOR" MEANS THE ENTITY THAT CONTRACTS WITH THE  
24 ADMINISTRATION PURSUANT TO SECTIONS 36-2940 AND 36-2944 TO PROVIDE SERVICES  
25 TO MEMBERS PURSUANT TO ARTICLE 2 OF THIS CHAPTER.

26 12. "SERVICE AREA" MEANS THE GEOGRAPHIC AREA IN WHICH THE COMPREHENSIVE  
27 CARE FOR THE ELDERLY ORGANIZATION HAS AGREED TO PROVIDE SERVICES UNDER THE  
28 COMPREHENSIVE CARE FOR THE ELDERLY PROGRAM AGREEMENT.

29 36-2999.02. Program; program contractors; interdisciplinary  
30 teams

31 A. THE COMPREHENSIVE CARE FOR THE ELDERLY PROGRAM IS ESTABLISHED TO  
32 PROVIDE MANAGED CARE BENEFITS TO MEMBERS OF THE ARIZONA LONG-TERM CARE SYSTEM  
33 THROUGH A COMPREHENSIVE MEDICAL AND SOCIAL SERVICE DELIVERY SYSTEM THAT USES  
34 INTERDISCIPLINARY TEAMS IN A CENTER WHERE PRIMARY AND OTHER SERVICES ARE  
35 PROVIDED. A PROGRAM CONTRACTOR MAY OFFER THE COMPREHENSIVE CARE FOR THE  
36 ELDERLY PROGRAM AS AN ALTERNATIVE MODEL TO THE ARIZONA LONG-TERM CARE SYSTEM  
37 SERVICE DELIVERY MODEL. THE COMPREHENSIVE CARE FOR THE ELDERLY PROGRAM SHALL  
38 PROVIDE SERVICES TO PARTICIPANTS PURSUANT TO THIS ARTICLE AND ALL STATE AND  
39 FEDERAL REQUIREMENTS THAT GOVERN THE ARIZONA LONG-TERM CARE SYSTEM.

40 B. A COMPREHENSIVE CARE FOR THE ELDERLY ORGANIZATION MUST ESTABLISH AN  
41 INTERDISCIPLINARY TEAM AT EACH COMPREHENSIVE CARE FOR THE ELDERLY CENTER TO  
42 COMPREHENSIVELY ASSESS AND MEET THE INDIVIDUAL NEEDS OF EACH PARTICIPANT.  
43 THE ORGANIZATION MUST ASSIGN EACH PARTICIPANT TO AN INTERDISCIPLINARY TEAM  
44 FUNCTIONING AT THE COMPREHENSIVE CARE FOR THE ELDERLY CENTER THAT THE  
45 PARTICIPANT ATTENDS. THE INTERDISCIPLINARY TEAM SHALL, IN COORDINATION WITH

1 THE PARTICIPANT, CREATE A MUTUALLY AGREED UPON CARE PLAN THAT MEETS THE  
2 MEDICAL, HEALTH, SOCIAL AND BEHAVIORAL HEALTH NEEDS OF THE PARTICIPANT. THE  
3 INTERDISCIPLINARY TEAM SHALL PROVIDE AND COORDINATE SERVICES THAT INCLUDE, AT  
4 A MINIMUM, PRIMARY CARE SERVICES AND ALL APPLICABLE LONG-TERM CARE SERVICES  
5 PURSUANT TO SECTION 36-2939.

6 C. THE ADMINISTRATION AND ITS PROGRAM CONTRACTORS SHALL COOPERATE IN  
7 THE DEVELOPMENT OF THE COMPREHENSIVE CARE FOR THE ELDERLY PROGRAM.

8 D. A PROGRAM CONTRACTOR SHALL MAKE A PROSPECTIVE MONTHLY PAYMENT,  
9 BASED ON THE CAPITATION RATE, TO THE COMPREHENSIVE CARE FOR THE ELDERLY  
10 ORGANIZATION FOR EACH PARTICIPANT.

11 36-2999.03. Eligibility determination; applications; enrollment

12 A. IN ADDITION TO THE ELIGIBILITY CRITERIA PRESCRIBED IN SECTION  
13 36-2934 AND THE PREADMISSION SCREENING CONDUCTED PURSUANT TO SECTION 36-2936,  
14 TO BE ELIGIBLE TO ENROLL WITH A COMPREHENSIVE CARE FOR THE ELDERLY  
15 ORGANIZATION, A PERSON MUST:

16 1. RESIDE IN A COMPREHENSIVE CARE FOR THE ELDERLY ORGANIZATION'S  
17 SERVICE AREA ON ENROLLMENT.

18 2. AGREE TO RECEIVE COVERED SERVICES THROUGH THE COMPREHENSIVE CARE  
19 FOR THE ELDERLY ORGANIZATION.

20 3. BE ABLE AT THE TIME OF SELECTION OF THE PROGRAM LIVE IN A COMMUNITY  
21 SETTING WITHOUT JEOPARDIZING THE PERSON'S HEALTH OR SAFETY.

22 4. A COMPREHENSIVE CARE FOR THE ELDERLY PROGRAM SHALL NOT DISCRIMINATE  
23 AGAINST POTENTIAL PARTICIPANTS ON THE BASIS OF THE HEALTH OF A MEMBER.

24 B. THE PROGRAM CONTRACTOR SHALL FORWARD RELEVANT INFORMATION PERTINENT  
25 TO THE POTENTIAL PARTICIPANT TO THE PROGRAM. ORGANIZATION STAFF WHO SHALL  
26 ASSESS THE APPLICANT'S APPROPRIATENESS FOR PARTICIPATION IN THE PROGRAM.

27 C. THE PROGRAM MUST COMPLY WITH THE TIME FRAMES AND PROCEDURES FOR ALL  
28 GRIEVANCES AND REQUESTS FOR HEARINGS ESTABLISHED THROUGH RULE BY THE  
29 ADMINISTRATION PURSUANT TO SECTION 36-2932.

30 36-2999.04. Case management; definition

31 A. IN ADDITION TO SERVICES PRESCRIBED IN SECTION 36-2939, THE  
32 COMPREHENSIVE CARE FOR THE ELDERLY ORGANIZATION SHALL PROVIDE CASE MANAGEMENT  
33 TO COORDINATE SERVICES AND PROMOTE ACCESS TO ALL NECESSARY MEDICAL, SOCIAL  
34 AND OTHER SERVICES. CASE MANAGEMENT SERVICES INCLUDE THE FOLLOWING:

35 1. AN IN-DEPTH ASSESSMENT TO DETERMINE THE LEVEL OF CASE MANAGEMENT  
36 NEEDED AND SERVICES TO BE ACCESSED.

37 2. AN INDIVIDUAL CASE MANAGEMENT SERVICE PLAN OUTLINING NEEDED  
38 SERVICES AND ACCESS PLANS.

39 3. SERVICE PLAN IMPLEMENTATION TO INCLUDE COUNSELING TO ENCOURAGE THE  
40 COMPREHENSIVE CARE FOR THE ELDERLY PARTICIPANT'S COOPERATION, SERVICE  
41 AUTHORIZATION, REFERRAL FOR SERVICES AND CASE COORDINATION.

42 4. A REVIEW OF THE SERVICE PLAN TO BE CONDUCTED ON AN AS-NEEDED BASIS,  
43 AT A MINIMUM OF AT LEAST ONCE EACH THREE MONTH PERIOD OF COVERAGE.

44 B. A COMPREHENSIVE CARE FOR THE ELDERLY ORGANIZATION SHALL PROVIDE  
45 PAYMENT OR REIMBURSEMENT ONLY FOR SERVICES PROVIDED PURSUANT TO THIS ARTICLE

1 UNDER REFERRAL FROM ITS INTERDISCIPLINARY TEAM THAT CONDUCTS CASE MANAGEMENT  
2 UNLESS IT IS AN EMERGENCY SERVICE.

3 C. FOR THE PURPOSES OF THIS SECTION, "CASE MANAGEMENT" MEANS A SERVICE  
4 THAT WILL DIRECT PARTICIPANTS TO THE MOST APPROPRIATE AMOUNT, DURATION AND  
5 TYPE OF SERVICES AND CONTINUALLY MONITOR AND REASSESS A PARTICIPANT'S NEED  
6 FOR SERVICES PROVIDED PURSUANT TO THIS ARTICLE.

7 36-2999.05. Establishment of capitation rate

8 A. UNDER A COMPREHENSIVE CARE FOR THE ELDERLY PROGRAM AGREEMENT THE  
9 PROGRAM CONTRACTOR SHALL MAKE A PROSPECTIVE MONTHLY PAYMENT TO THE  
10 COMPREHENSIVE CARE FOR THE ELDERLY ORGANIZATION OF A CAPITATION RATE FOR EACH  
11 MEDICAID PARTICIPANT.

12 B. THE COMPREHENSIVE CARE FOR THE ELDERLY ORGANIZATION MUST ACCEPT THE  
13 CAPITATION PAYMENT AS PAYMENT IN FULL FOR MEDICAID PARTICIPANTS AND MAY NOT  
14 BILL, CHARGE, COLLECT OR RECEIVE ANY OTHER FORM OF PAYMENT FROM THE PROGRAM  
15 CONTRACTOR, ADMINISTRATION OR FROM OR ON BEHALF OF THE COMPREHENSIVE CARE FOR  
16 THE ELDERLY PARTICIPANT, EXCEPT AS FOLLOWS:

17 1. PAYMENT WITH RESPECT TO THE SHARE OF COST AND ANY AMOUNTS DUE UNDER  
18 THE POSTELIGIBILITY TREATMENT OF INCOME.

19 2. MEDICARE PAYMENT RECEIVED FROM THE CENTERS FOR MEDICARE AND  
20 MEDICAID SERVICES OR FROM OTHER PAYORS.

21 3. ADJUSTMENTS RELATED TO ENROLLMENT AND DISENROLLMENT OF  
22 COMPREHENSIVE CARE FOR THE ELDERLY PARTICIPANTS IN THE COMPREHENSIVE CARE FOR  
23 THE ELDERLY ORGANIZATION.

24 4. A FEE-FOR-SERVICE PAYMENT BY THE ADMINISTRATION OR THE CENTERS FOR  
25 MEDICARE AND MEDICAID SERVICES PRIOR TO THE PARTICIPANT BEING CAPITATED.

26 36-2999.06. Organizations; additional responsibilities;  
27 exemption from title 20

28 A. COMPREHENSIVE CARE FOR THE ELDERLY ORGANIZATIONS SHALL COMPLY WITH  
29 ALL RESPONSIBILITIES AND REQUIREMENTS PRESCRIBED IN SECTIONS 36-2946.

30 B. TO THE EXTENT THAT SERVICES ARE PROVIDED PURSUANT TO THIS ARTICLE,  
31 A COMPREHENSIVE CARE FOR THE ELDERLY ORGANIZATION IS NOT SUBJECT TO THE  
32 PROVISIONS OF TITLE 20.

33 36-2999.07. Reporting requirements

34 A. ON AN ANNUAL BASIS, THE ADMINISTRATION SHALL REPORT ON ITS EFFORTS  
35 TO SUPPORT THE DEVELOPMENT AND IMPLEMENTATION OF THE PROGRAM ESTABLISHED  
36 PURSUANT TO THIS ARTICLE.

37 B. THE ADMINISTRATION SHALL SUBMIT A COPY OF ITS REPORT TO THE  
38 GOVERNOR, THE PRESIDENT OF THE SENATE, THE SPEAKER OF THE HOUSE OF  
39 REPRESENTATIVES AND THE CHAIRPERSONS OF THE HEALTH COMMITTEES OF THE SENATE  
40 AND THE HOUSE OF REPRESENTATIVES, OR THEIR SUCCESSOR COMMITTEES.

41 36-2999.08. Program termination

42 THE PROGRAM ESTABLISHED BY THIS ARTICLE TERMINATES ON JULY 1, 2016,  
43 PURSUANT TO SECTION 41-3102.

~~APPROVED BY THE GOVERNOR JUNE 1, 2006.~~

~~FILED IN THE OFFICE OF THE SECRETARY OF STATE JUNE 1, 2006.~~